

# **The Thriving Doctor**

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Illustrated by Glenn Finlay

## INTRODUCTION

**Thriving:** adjective

*Prosperous and growing; flourishing* (Oxford)

*Someone or something that is doing well  
and is successful, healthy, or strong* (Collins)

The experienced medical director sitting opposite me in coaching said:  
“You were the first person to ever ask me: – *what do you want?*”

He went on to describe the profound impact this simple question had had on him. These four words had given him permission to discover, to imagine, to believe that he could meet some of his own needs once he knew what they were.

These four words had freed him from the straight jacket the culture of medicine had bound him in for 25 years and ultimately allowed him to practise medicine with renewed energy and focus. He felt happier, stronger, and was enjoying his family and his work more than he had for two decades.



## PATIENTS WILL BENEFIT TOO

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I understand that in your role as doctor you are committed to patient safety and patient health. You are possibly only interested in reading books that impact positively on patient care. On this front the research is very clear. **Well doctors are better doctors, and they help their patients achieve better health outcomes.**

The Institute of Medicine described the primary determinants of healthcare quality in 2001; one of which was patient-centred care. They described this as “Healthcare that establishes a partnership among practitioners, patients and their families”. Further to this, they concluded that patient-centred care is nothing less than a “Quality and business imperative”, and that “In general, **most patients feel confident** that they will receive **competent technical care** when they enter a hospital or healthcare centre”. Beyond that, “**What matters most** to them is being **treated with kindness, compassion and dignity**”.

A doctor who builds positive relationships with their patients is perceived by them as more empathic and more compassionate. These patients continue with their treatment more consistently and for longer duration. Not surprisingly they have better health outcomes including faster recovery rates and better immune response.

The healing power of positive interactions has been well documented, and often forgotten in the measurement of success in healthcare. For example, Rakel et al (2009 and 2011) compared recovery time and immune responses of three groups of patients with upper respiratory tract infections. Immune response was most vigorous and recovery time shortest in patients with empathic physicians. Recovery time was longest for the group with doctors who lacked empathy – longer than those who saw no doctor at all! Rakel and team concluded that empathy in the therapeutic encounter resulted in faster recovery times for flu patients.

The science of medicine is data-driven, humans may not be. Doctors are humans first; emotional beings like their patients, being asked to ignore the art of medicine to their own and their patients’ detriment.

**Raising your capacity to care for yourself improves patient health outcomes, patient experience and patient safety.**

As you prioritise taking better care of yourself, you have greater capacity to be empathic, compassionate and patient centred. As you raise the care of your patients by being well yourself and raising your skills, you can build confidence, trust and respect in yourself, and others too will have more confidence, trust and respect in you.

Your state of health and wellbeing must come first. All other healthcare goals ride on this. Only when you have the skills to take care of yourself effectively can you truly take care of anyone else properly.

## YOU CAN MAKE A DIFFERENCE IN YOUR OWN MEDICAL LIFE

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There is a great deal every individual doctor can do to improve their own experience at work in the healthcare system and in medicine – for both themselves and their patients. To do so you need to engage your own agency, the same agency you used to get into medicine in the first place.

**Personal agency is a sense of control over your own actions and the consequences.**

When you do exercise your personal agency, you bring your influence to bear on what you can control in your own life. Exercising control over your thoughts, motivation, and actions, you remember and hold dearly the belief that you can make decisions and enact them for your own benefit. In this empowered state you are also more likely to make a difference for those around you.

Surgeon and former CEO of Keiser Parmenter Dr Robert Pearl says in his book *Uncaring (2021)* that medicine has taught doctors how to cure people, but it has not done such a good job of teaching you how to *care* for them. He is pointing to the science of medicine being more valued than the

art of medicine. Whether you agree with Dr Pearl or not, I think we can take it a step further and recognise that medicine has not done a good job of teaching *you how to care for yourself* in the face of the work you do.

Did anyone actively teach you how to maintain your health and well-being so that you could be the best doctor you can be? So that you can continue performing your work at your best for the long term in the face of so much human suffering?

Medicine has more likely actively trained you to look after others first and by implication to neglect your own wellbeing. Many of the structures, systems and much of the culture of medicine has even rewarded you for neglecting your own wellbeing. Although it was probably not any individual's intention, this has had the impact of creating risk for patients and for providers.

This book is about what you can do as a doctor beyond technical clinical skill to be a safe, trusted, high-performing doctor who achieves career longevity, satisfaction and wellbeing as you go.

Your technical clinical skills are not necessarily going to help you cope with fatigue, unsuccessful patient treatments, giving bad news to patients, sleep deprivation, bullying, trauma, or self-doubt. **Your non-clinical skills are essential to delivering the best medical care.** Underdeveloped, they limit your success with patients and reduce your wellbeing, now and over the course of your medical career. To be the best doctor you can be, you must also pay attention to developing your interpersonal skills and your internal regulation skills (intrapersonal). Who knows, you may even come to see these skills as essential clinical skills!

Take care of yourself first, that is within your control.

## BECOMING AN AGENT OF CHANGE IN YOUR OWN LIFE

Prevention is better than a cure.

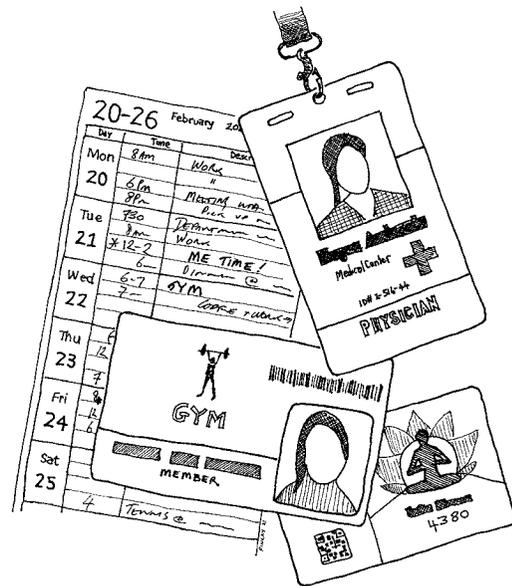
I hope to help you activate yourself to build the skills you need for a joyful, fulfilling, satisfying life in medicine. This book is **not** focused on what to do *after* you have burned out, it is about how to break that pattern. This book does not promise you more happiness, though according to the doctors I have worked with it's a likely by-product. **This book is about prevention, personal agency, empowerment, finding and keeping your balance, and human connection.** In these pages, you will reconnect with the agency you have called on to get this far in your medical career. These skills can help you thrive and flourish.

You will learn the skills you need to be able to take charge of yourself, building on them to:

- perform your work at a high level
- lead others effectively and warmly
- maintain your wellbeing throughout a long-term medical career
- achieve more work-life balance.

When you do, when you are flourishing, everyone else around you will reap the benefits too and the systems will change, because the systems are made up of people. Medicine is a human construct, built and delivered by humans for humans.

Well, effective, empowered people respond to and create different systems to those who are burned out, disappointed and ill-equipped.



Work-life balance isn't a mystery, even in medicine. It's a series of habits that become routine. It's a skill set that you practise like with any other skill you want to develop. It's a conscious effort that exercises your personal agency, empowering you to live how *you* choose rather than the system making you into a victim. You have used your personal agency to get this far, I'm inviting you to use it again to design the life you want even while you work in healthcare.

To do so, you need to know what it is you want for your life. Imagine being clear about what gives your life meaning, being purposeful in your actions and clear of mind. Imagine achieving the right work-life balance for you and your family, enjoying your work, having strong trusting relationships with your colleagues and building a medical practice that is sustainable.

**This book is about the tools you need to look after yourself. When you use them consistently and skilfully you will be well and more effective. You will be much more able to deliver optimal care to your patients.**

## WHY READ THIS BOOK / HOW TO USE THIS BOOK

I get that you are time poor and reading a book about improving your performance and wellbeing might seem like a luxury. I promise, it's a short-term pain for a long-term gain. You, your family, your patients, their families, and your colleagues will benefit from your decision to take action.

Make a commitment to yourself today and make one change in your life in service of a better life. Give yourself 45 minutes and read one chapter.

You picked up this book for a reason, what did you hope to find? What is it that you need? Are you ready to take one small step towards a better medical life? Step wisely into your own power with humility and readiness to learn.

**Think of learning these non-clinical skills like superannuation, the sooner you invest in them the greater return you, your patients and your family will get.**



Embracing this work creates intimate knowledge of your inner world and facilitates agency, helping you do more and be more of what you love.

When you have a warm relationship with yourself, deeply attuned to your own needs, desires, aversions and meaning making, your influence and relationships with others change in positive ways, sometimes incrementally and sometimes as transformation, both are useful. In this way, meaning making facilitates the other four elements of PERMA - positive emotions, more engagement, effective relationships, and achievement, helping you to do more than survive medicine – helping you flourish.

### *Actions for knowing yourself*

1. Understand what you seek so you can focus your effort meaningfully, this is your purpose anchor.
2. Unearth and name your primary beliefs – decide which ones serve you well. Consider letting some go.
3. Identify your core values. Along with your purpose anchors, these are your guides.
4. Make values-based decisions, reduce the amount of cognitive dissonance you hold.
5. Create an external scaffold of habits and trusted people to help you deliver committed actions aligned with your values and purpose.
6. Practise! Skills come first. Confidence grows as a result of skill.
7. Practise recognising your role as distinct from your self. Notice the dynamic nature of their overlap. Make sure there is enough of an overlap to feel authentic in your role.

# 5

## RELIEVE STRESS

### Naomi's Story

*Naomi worked as an advanced trainee obstetrician and gynaecologist. She moved hospitals every six months as part of her training program, including to regional areas.*

*For weeks at a time, she was away from her partner and young children, focusing on her goal to fellow. I met her when she had just arrived at a regional city rotation and was studying for her exam, which was three months away.*

*During her last shift at her 'parent' hospital in the city, her supervisor had given her the collective feedback from the consultants she had been working with. Most of it was great, but someone had said she needed to work on her confidence, that she wasn't yet behaving like a consultant.*

*Moving to a new hospital with no familiar colleagues, no knowledge of the region or the hospital processes, and no support network was stressful. In her new rotation, Naomi felt anxious. The feedback had confused her and was playing on her mind. It was vague and behavioural examples had not been provided.*

*She began the rotation on nights by herself. Within a couple of hours of one shift, there were three women giving birth, two with complications, and one of those with twins. She had not met any of the consultants working at the new hospital, but on this night she definitely needed to call someone. Yet now she was overthinking what it would look like if she was seen to be asking for help so early.*

*When we met a few days later, Naomi was wracked with doubt and anxiety, and was extremely tired. She said, "If I don't pass this exam, I don't know what I'm going to do." She was totally unsupported at her regional hospital. Her role as trainee was swamping the rest of her life, her self. She needed to learn to separate what was a stressor in her environment from the internal stress response she was feeling. Only then could she begin improving her own situation.*

## DISTINGUISH STRESS FROM STRESSORS

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Being a doctor involves a lot of stress. Distinguishing stressors from the stress response in your body will help you respond much more effectively than using the general idea of being stressed. For Naomi, identifying the vague consultant feedback as a stressor helped direct our work in coaching. So did recognising that the stressors at the new hospital changed rapidly as she got to know people and processes. Naming the specific factors that were causing stress made a big difference to her stress level.

In this chapter, we will review how you can understand the stress response and its opposite, the relaxation response, for your benefit. We will take a closer look at how your improving self-awareness and the skills of self-regulation and can set you up to manage stress better.

Knowing about the physiology of stress doesn't always mean you are good at managing stress in your own life.

## YOUR STRESSORS ARE YOURS TO MANAGE

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Managing stress effectively means being able to identify the factors in your life that make you feel stressed - the **stressors**. Which factors create stress for you is unique and personal. The same factor may not trigger the person next to you. Talking about stress in general terms isn't especially helpful in regards to knowing how to respond.

For example, I find it incredibly stressful if a cat walks past me and rubs against my legs. Many people find it ridiculous that I am triggered by a small friendly animal! The cat is a stressor in my environment for me personally. It is not a stressor for most other people. If a cat comes along, I *feel* stressed. My mind starts telling me stories of being scratched and triggers my body's stress response. It doesn't matter what other's think, it doesn't even matter what my own rational mind thinks, I am still stressed when a cat is around.

The cat itself is not stress, the cat is triggering *my* stress response, changing my internal environment because of what I believe and pay attention to. *My* stress response is caused by *my* thoughts about the cat, which in this case come from my history. For others, a cat will trigger their relaxation response, the opposite physiological reaction to the stress response. For many, a cat won't trigger any change of state at all. Naming the stressor gives me a focus for action, it allows me to be responsive instead of reactive.

How you respond to life, what you think about it, affects your performance and your wellbeing. These factors are intimately interconnected. You can leverage your performance and your wellbeing up or down by the way you think about the stressors in your life. These thinking patterns are not always conscious though; they can be triggered by your brain well before you have any awareness of what's happening. Your thinking can also be distorted if you are depleted (remember HALLTSS from Chapter 3) so there is a limit to how many stressors you can pile on.

Naming the stressors helps you take specific action to remove or attend to them. Managing the stressors that remain requires your skilful internal response.

Naming your stressors allows you to respond more effectively, creating opportunities to leverage and influence your performance and your wellbeing, improving your sense of balance and your opportunity to thrive.

## STRESS IS NOT NECESSARILY BAD

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Stress itself is not bad, in fact it's incredibly useful in the right dose. Another way to think about stress is to think of being *activated*.

When world champion surfer Mick Fanning was filmed fighting off a shark in 2015 in the J-Bay Open World Surfing League in South Africa, you could see that his body was fully activated. Before he consciously processed the shark was there, his brain had already triggered his stress response: more blood was directed to his muscles, his mind became single focused, his heart and lungs were working at maximum capacity, his digestive and reproductive systems shut down and his sight and hearing were automatically turned up.

Mick's body would have been activated at a low level already, he was after all surfing in an international competition. But as a seasoned world champion, he may not have been *aware* of much activation.

When the shark took a swipe at Mick's board, his body amped up the level of stress response activation in a millisecond. The shark was a much more threatening stressor than any surfing competition could be for him at that moment. His automatic responses kept him alive much more effectively than his slow conscious prefrontal cortex processes could have.

This activation happened quickly, automatically and powerfully to meet the high-level threat to his survival. A minute later, safely on a rescue boat, Mick was shaking from the adrenaline surge. This kind of threat to survival activates humans instantly, and then takes just minutes to a few hours for our physiologically to return to baseline.

How often is your body activating as if there is a shark in the water? If your body is maintaining your stress response continuously, it will be difficult for you to achieve a sense of balance and it is unlikely that you will have the necessary energy for agency in your own life. This is an unsustainable position and puts you and your patients at risk. Chronic activation of the stress response dysregulates you and clear thinking becomes near impossible.

Most of us, most of the time, can successfully integrate the stressful experiences of our lives with the right tools and the right support. Thankfully, Mick survived and has become an advocate for sharks,

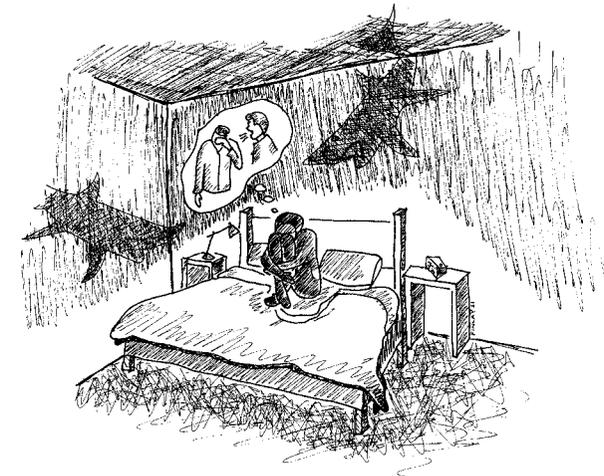
demonstrating clearly how a person with the right tools and support can take a highly stressful event and integrate it into their life. He serves as a clear example of how the feeling of being stressed can evolve differently: it can resolve and be integrated into our lives, or it can continue on as a chronic problem. The stressor is only an ongoing problem because of the story you tell yourself, not because it exists.

Your internal environment – what you believe, value, pay attention to, are aware of – affects how much stress you experience.

Whether something triggers your stress response or not can change over time, it's contextual. The very same trigger can be stressful sometimes and not be other times, for the same person.

## YOUR BODY ONLY HAS ONE PHYSIOLOGICAL RESPONSE TO STRESSORS

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Your body only has one stress response – the same cascade of neurochemicals, hormones and other physiological changes happens in all situations that are stressful for you. If you are lying in your bed and dream

of a shark attacking you, your body will activate in the same way as if it's really happening. If you are at work and feel like the supervisor or consultant is going to challenge or embarrass you, your body will react the same way. If you are asked to perform a procedure you have never done before, that can be terrifying and will activate the same physiological stress response.

**Your physiological responses to stress are the same whether you imagine, anticipate, remember, or are actually in the middle of a terrifying event.**

Once you identify the stressors in your life, you can do something about them. Being specific about your stressors is important. Saying you are stressed in a generalised way does not show you what you can do to improve the situation. Victor Frankl managed his stress in Auschwitz concentration camp by focusing his attention on his hope of meeting his wife again one day. Mick Fanning managed his post shark attack stress by learning as much as he could about sharks.

Can you name the specific stressors in your life that are triggering your stress response? Be as specific as possible. How do you want to respond to them? You get to choose.

**The first step is to distinguish between the stressors in your life and your experience of being stressed. Identify what is uniquely stressful for you.**

Perhaps you are stressed by the number of patients you need to see in clinic, or a particular consultant whom you feel intimidated by, or the NUM who shows her frustration easily when you are indecisive, or the idea of deciding what you will eat for dinner after a 12 hour shift, or the interview process you need to go through to keep your job for another

year, or inserting a canula into a young child. Perhaps you are stressed about how you misdiagnosed a patient because you were stressed in the ED or so overwhelmed by how many patients were waiting for you.

**There are thousands of potential stressors in your life. Practise naming them specifically.**

## PERCEIVING STRESS – THE STORY YOU TELL YOURSELF

The wrong response to stress can be fatal. In fact, researchers have found that our *beliefs* about stress might be more important than the stressor in terms of our wellbeing. Keller, Litzelman, Wisket et al (2012) looked at a representative sample of people in the US between 1998 and 2006. They looked at the national health interview survey and the national death index to understand the impact of the amount of stress in a person's life, their perception of how stress affected their health, and who died prematurely.

They found that a high amount of stress plus a perception that stress affects health negatively, increased a person's risk of premature death by 43%. Importantly, they also found that people who had lots of stress in their life but did not regard it as harmful, were no more likely to die prematurely than people with the lowest levels of stress in their lives. The people with high stress but no negative perceptions about it had the lowest risk of dying prematurely.

**The biggest risk factor for dying prematurely from stress related causes is having the perception that stress is bad for you.**

## ACTIVITY 8

### Try this:

1. Learn to recognise your specific stressors. Notice and name them.
2. Practise labelling your body's stress response as **activation**. Words are important –what happens when you say to yourself “I’m activated” instead of saying “I’m stressed”?

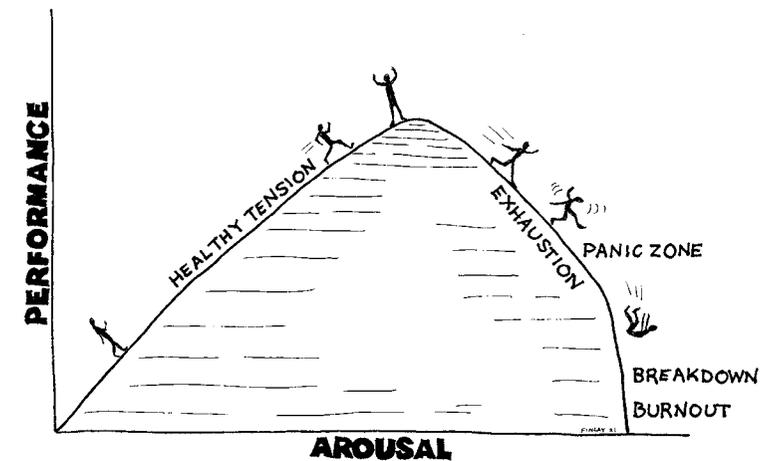
Do you feel or think differently?

Are you more aware of a sense of choice and agency, rather than feeling like a victim or being trapped?

3. Try it out for the next week, each time you notice a story you are telling yourself about stress, replace the word *stressed* with *activated*. Be curious, pay attention, and see what you learn.

## FIND YOUR ACTIVATION SWEET SPOT

Yerkes and Dodson first described the stress curve in 1908 to explain the relationship between pressure and performance, demonstrating that arousal increases performance but only up to a point, and then performance decreases. When it comes to your body being aroused, it is not the case that more is better. Too much stress causes your internal system to be overwhelmed. Not enough stress will make it hard for you to generate energy and focus. The sweet spot is enough stress – activation – to achieve your goals.



Where you are on the stress curve will differ depending on your activity. If you are doing a difficult or novel task, you will not need as much activation (stress) to perform as well as when you are doing something that requires persistence or stamina.

As a trainee surgeon, for example, you will not need much activation to help you focus and concentrate on learning a new surgical technique, you will be naturally present because the activity is novel and perhaps the risk to patient safety is high. If you are also feeling intimidated by your supervisor and this is triggering your stress response as well, you could easily be over aroused and feel overwhelmed, pushing you over the top of the stress curve, reducing your performance. You might describe this as being too stressed.

In activities that are routine or require long-term concentration or commitment, you will need to be more aroused for peak performance to keep you motivated. Your experience of stress depends on:

- the activity itself
- the environment
- your internal response (your perception/story).

Your body is aroused (or not) by the environment and by your perception of whether you have the resources required to meet the need or

neuronal highways unconsciously and easily – they are our habits. We have many emotional habits.

### ACTIVITY 14

Autopilot is a fast, powerful mechanism. If I say, “Twinkle, twinkle little \_\_\_\_\_”

What happened? You probably said or thought *star* before you even knew it was going to happen. Was it just there automatically without you even trying?

What’s your response if I say:

Black and \_\_\_\_\_

Boys and \_\_\_\_\_

Night and \_\_\_\_\_

It’s likely that you answered white, girl and day, most people do because you have been acculturated. The world that you live in has taught you the answers, and now they are part of your default patterns, the answers are automatic.

***For you to think of a different answer, you have to slow down and engage some conscious thought, more intentionally using the space between the stimuli and your response.***

Here’s another example you might recognise: *how are you?*

Did you automatically say or think: *fine, good, okay, or well thanks?*

All of these are legitimate answers and may sum up how you are perfectly. If you’ve practised saying “I’m fine” to every inquiry, even when you’ve been in great distress, you have no doubt developed an automatic pattern, a default network habit. As a result, you may not have developed the skills of emotional literacy, self-care, or those

of asking for help. Your emotional wellbeing may be limited by your habitual default pattern of saying you’re fine.

Neurologically, you are operating in a problematic loop of cognitive rigidity rather than being psychologically flexible, cognisant, and responsive to the context. You are living unconsciously on autopilot, with rigid thinking that locks you into a narrow range mentally and behaviourally. In this state of autopilot and distraction, emotions remain a mystery and much of the information is outside of your awareness. You are essentially emotionally rigid, hooked on the same repeated thoughts that limit your emotional experience.

### Reflection

- Why would you automatically say “I’m fine” at work, even when you are not? What’s the dominant story at play?
- What’s the operant emotion/s?
- Is it fear of being seen as weak?
- Is it a need to be seen as perfect, tough, upbeat and resilient?
- Did you miss your own signposts?
- Are you attuned enough to know how your body and mind actually are? If so, are you really fine all of the time?
- Does the habit of saying “I’m fine” serve you well?

Did reading and answering these questions evoke any emotion in you just now?

If it did, sit with it for a minute, what is the signpost telling you?

Next time someone asks you how you are, take a moment to make it an opportunity to grow your emotional intelligence. Check in with your body, be curious to learn how you really feel and see if you can give your state an emotional name beyond fine, good, or okay, even if only to yourself. Over time you will get more comfortable with a wider range of experiences and grow your emotional literacy and accuracy.

## FURTHER READING

As well as formal references, there are a lot of books and articles that inform my practice and this work. Some of them provide background understanding and others serve as inspiration provoking new thinking and inspiration. In case any of them are of interest or benefit to you, I have provided this further reading list.

**Change Your Brain, Change Your Life** by D.G. Amen  
*Three Rivers Press, New York 1998*

**Mastering Leadership** by R.J. Anderson and W.A. Adams  
*John Wiley and Sons, New Jersey 2016*

**The Plastic Mind** by S. Begley  
*Constable and Robinson, London 2009*

**Physical Wellness: The rock star doctor's guide** by R. Bernard and S. Cohen  
*Rebekah Bernard md and Steven Cohen PsyD, USA 2015*

**Games People Play: The psychology of human relationships** by E. Berne  
*Penguin Books, USA 1964*

**Against Empathy: The case for rational compassion** by P. Bloom  
*HarperCollins Publishers, New York 2016*

**Dancing at the River's Edge: A patient and her doctor negotiate life with chronic illness** by A. Brill and M.D. Lockshin  
*Schaffner Press, Inc., Arizona 2009*

**Daring Greatly: How the courage to be vulnerable transforms the way we live, love, parent and lead** by B. Brown  
*Penguin Books, London 2013*

**Dare to Lead** by B. Brown  
*Vermilion, London 2018*

**The Coaching Habit** by M. Bungay Stanier  
*Box of Crayons Press, Canada 2016*

**The Mindful Leader** by M. Bunting  
*Wiley and Sons, Australia 2016*

**Shame** by J. Burgo  
*St. Martin's Press, USA 2018*

**The Emotionally Intelligent Manager** by D.T. Caruso and P. Salovey  
*Jossey-Bass, San Fransisco 2004*

**Clark, T.R. The 4 Stages of Psychological Safety: Defining the path to inclusion and innovation** by T.R. Clark  
*Berrett-Koehler Publishers, California 2020*

**Atomic Habits: An easy and proven way to build good habits and break bad ones** by J. Clear  
*Random House, USA 2018*

**From Good to Great** by J.C. Collins  
*Random House, UK 2001*

**The Health Hazard: Take control, restore wellbeing and optimise impact** by A. Coughlan  
*Grammar Factory Publishing, Canada 2021*

**The 7 Habits of Highly Effective People** by S.R. Covey  
*Simon and Schuster, UK 1989*

**The Compete Handbook of Coaching 2nd Ed** by E. Cox, T. Bachkirova and D. Clutterbuck (Eds)  
*Sage, London 2014*

**Flow: the psychology of optimal experience** by M. Csikszentmihalyi  
*HarperCollins, New York 1990*

**Presence: Bringing your boldest self to your biggest challenges** by A. Cuddy  
*Orion ,Great Britain 2016*

**Emotional Agility** by S. David  
*Penguin Life, Great Britain 2016*